

U.S. UTILITY Patent Application

**O.I.P.E.**

**PATENT DATE**

SCANNED

HKm3 Q.A. *[Signature]* 3

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|------------------------------|------------|--------------|------------------------------|------------------|---|
| APPLICATION NO.<br>09/887778 | CONT/PRIOR | CLASS<br>455 | SUBCLASS <sup>A</sup><br>522 | ART UNIT<br>2684 | EXAMINER<br><i>[Signature]</i> A. [Signature] |
|------------------------------|------------|--------------|------------------------------|------------------|---|

Carl Panasik  
Steve Lazar

Cellular handset transceiver system for minimal power consumption

PTO-2040  
12/99

| ISSUING CLASSIFICATION       |  |          |  |                    |                                   |  |  |  |  |  |  |  |
|------------------------------|--|----------|--|--------------------|-----------------------------------|--|--|--|--|--|--|--|
| ORIGINAL                     |  |          |  | CROSS REFERENCE(S) |                                   |  |  |  |  |  |  |  |
| CLASS                        |  | SUBCLASS |  | CLASS              | SUBCLASS (ONE SUBCLASS PER BLOCK) |  |  |  |  |  |  |  |
|                              |  |          |  |                    |                                   |  |  |  |  |  |  |  |
| INTERNATIONAL CLASSIFICATION |  |          |  |                    |                                   |  |  |  |  |  |  |  |
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| <input type="checkbox"/> <b>TERMINAL<br/>DISCLAIMER</b>  | <b>DRAWINGS</b>                              |                    |                   | <b>CLAIMS ALLOWED</b>             |                             |
|  | <b>Sheets Drwg.</b>                          | <b>Figs. Drwg.</b> | <b>Print Fig.</b> | <b>Total Claims</b>               | <b>Print Claim for O.G.</b> |
| <input type="checkbox"/> The term of this patent subsequent to _____ (date) has been disclaimed.   | _____<br>(Assistant Examiner) (Date)         |                    |                   | <b>NOTICE OF ALLOWANCE MAILED</b> |                             |
|  |  |                    |                   |                                   |                             |
| <input type="checkbox"/> The term of this patent shall not extend beyond the expiration date of U.S Patent. No. _____<br><br>_____   | _____<br>(Primary Examiner) (Date)           |                    |                   | <b>ISSUE FEE</b>                  |                             |
|  |  |                    |                   | <b>Amount Due</b>                 | <b>Date Paid</b>            |
| <input type="checkbox"/> The terminal ____ months of this patent have been disclaimed.   | _____<br>(Legal Instruments Examiner) (Date) |                    |                   | <b>ISSUE BATCH NUMBER</b>         |                             |
|  |  |                    |                   |                                   |                             |
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